



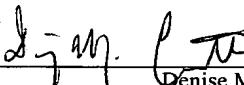
IFW
1637

Docket No: 10738-29

PATENT

CERTIFICATE OF MAILING

I hereby certify that this paper is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment; Commissioner for Patents; P.O. Box 1450; Alexandria, VA 22313-1450 on January 12, 2006.


Denise M. Everett

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IN THE UNITED STATES PATENT & TRADEMARK OFFICE

Applicants: Sharp, Frank R. et al

Serial No.: 09/996,275

Group Art Unit: 1637

Filed: Nov. 28, 2001

Examiner: Jeffrey N. Fredman

For: **Blood Assessment of Injury**

AMENDMENT

10 Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

15 Dear Sir:

In response to the Office Action dated October 12, 2005, Applicants submit the following Amendment.

Amendments to the Specification are set forth beginning on page 2 of this paper.

20 **A Current Listing of the Claims** begins on page 3 of this paper.

Remarks begin on page 18 of this paper.

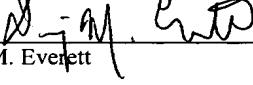


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Denise M. Everett

IN THE UNITED STATES PATENT & TRADEMARK OFFICE

Applicant: **Frank R. Sharp**

Serial No.: **09/996,275** : Group Art Unit: **1637**

Filed: **November 28, 2001** : Examiner: **Jeffrey N. Fredman**

For: **Blood Assessment of Injury**

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an Amendment in the above-identified application.

additional fee is required.
 also attached: Amendment, Return postcard

The fee has been calculated as shown below:

	NO. OF CLAIMS	HIGHEST PREVIOUS PAID FOR	EXTRA CLAIMS	RATE	FEE
Total Claims	91	93	0	x \$25 =	\$-0-
Independent Claims	14	14	0	x \$100 =	\$-0-
If multiple claims newly presented, add \$145.00					-----
0 Month Extension Fee					\$-0-
Information Disclosure Statement					\$00.00
TOTAL FEE DUE					\$-0-

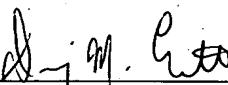
Please charge my Deposit Account No. 04-1133 in the amount of \$.

Please charge the amount of \$____ to our Visa credit card. Form PTO-2038 is enclosed.

The Commissioner is hereby authorized to charge payment of any additional fees associated with this communication or credit any overpayment, to Deposit Account No. 04-1133, including any filing fees under 37 CFR 1.16 for presentation of extra claims and any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,

By:


Denise M. Everett

Registration No.

Attorney for Applicant(s) 47,552

DINSMORE & SHOHL LLP

1900 Chemed Center

255 East Fifth Street

Cincinnati, Ohio 45202

(513) 977-8787